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Prepared by:

Cumulative Index to Nursing
& Allied Health Literature
1509 Wilson Terrace
P.O. Box 871
Glendale, CA 91209-0871

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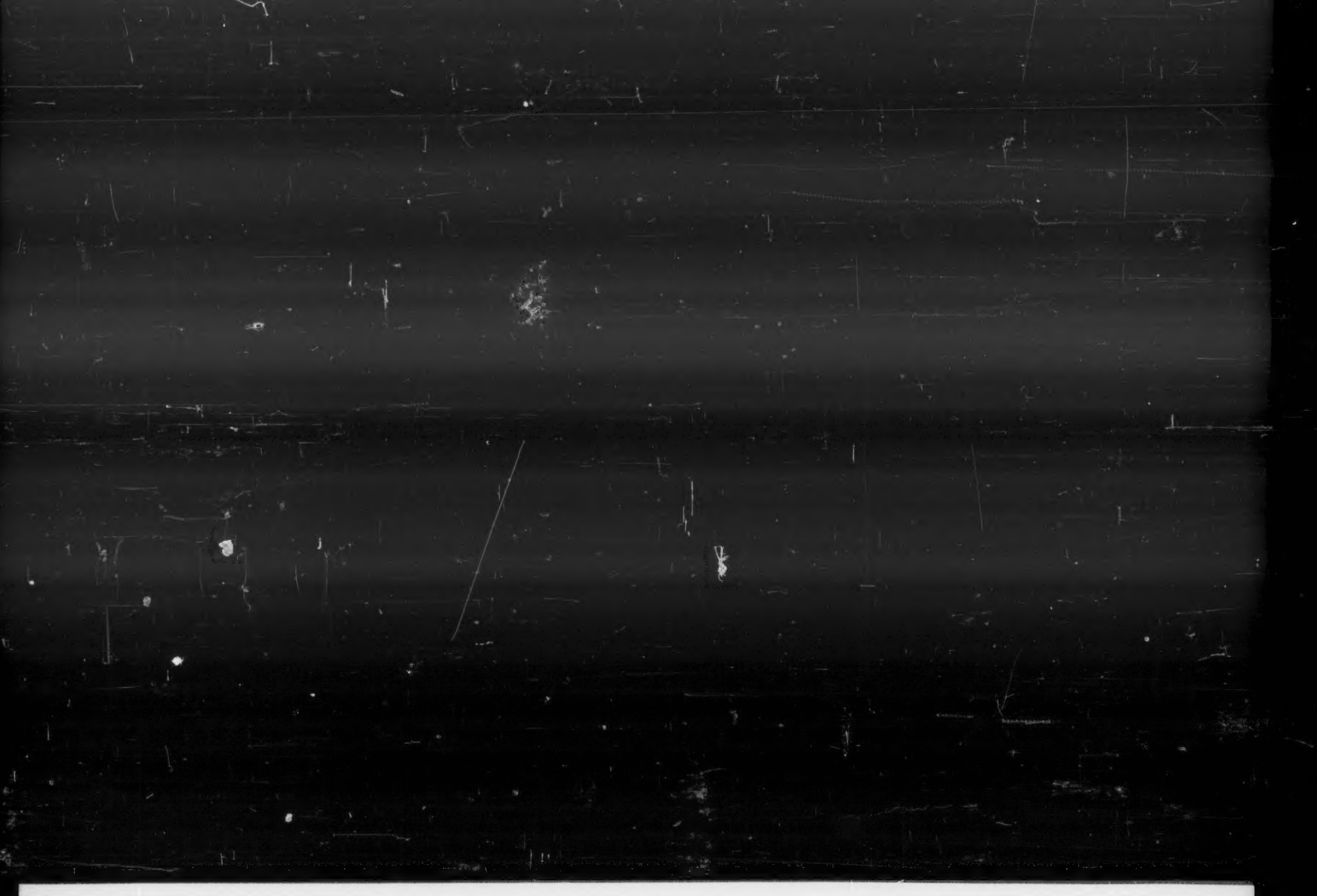

LIPIDS

LIPIDS

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ORGANIZATIONAL CULTURE

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PERSONNEL, HOSPITAL

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PERSONNEL MANAGEMENT

Motivation: creating the environment (Lancaster J) 1986 Jan; 43(1): 202-4, 206, 208 (9 ref)

Effective criticism: producing positive changes (Ivey DF) 1986 Feb; 43(2): 470, 472-5 (7 ref 4 bib)

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PHEOCHROMOCYTOMA — SURGERY

Surgical intervention for pheochromocytoma (Staren ED et al) 1986 Nov; 44(5): 758-9, 761, 764-5 (26 ref)

POLITICS

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Nurses must use power in legislative arena to affect health care and professional issues (Lewis JA) (editorial) 1986 Aug; 44(2): 144, 146

Perioperative nurses must be politically active (Arvidson AC) 1986 Oct; 44(4): 525, 526

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POWER

Nurses must use power in legislative arena to affect health care and professional issues (Lewis JA) (editorial) 1986 Aug; 44(2): 144, 146

PREOPERATIVE CARE

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PRIVACY, RIGHT OF — LEGISLATION AND JURISPRUDENCE

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PROBLEM SOLVING

Solving ethical problems (Wax J) 1986 Mar; 43(3): 608, 610, 612

PROFESSIONAL IMAGE

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Use of Heimlich Maneuver Argued in Near-Drowning

Henry J. Heimlich, MD, developer of a maneuver used to help victims choking on objects, has taken issue with another physician who criticized the use of the Heimlich maneuver in the resuscitation of near-drowning victims. Dr Heimlich contended that the maneuver is effective in expelling water from the airway and lungs in persons who are drowning in either salt water or fresh water.

In a letter published in the Dec 5, 1986, issue of the *Journal of the American Medical Association (JAMA)*, he observed that the maneuver is now taught by the American Red Cross and the American Heart Association as a method for saving near-drowning victims.

Dr Heimlich took issue with an article written by Joseph P. Ornato, MD, in the July 4, 1986, issue of the *JAMA* that stated there was inadequate scientific evidence to recommend using the Heimlich maneuver on near-drowning victims.

Dr Heimlich suggested that data had been selectively excluded from Dr Ornato's references, minimizing the pathophysiological significance of aspirated water and the effectiveness of the Heimlich maneuver in expelling that water from a victim's breathing passages.

Dr Heimlich cited case reports by physicians and ambulance squads who observed the recovery of lifeless near-drowning victims when the Heimlich maneuver expelled water after cardiopulmonary resuscitation had failed.

Dr Ornato replied that new standards for cardiopulmonary resuscitation restrict the use of the Heimlich maneuver in cases of near-drowning to only those circumstances in which the rescuer suspects that foreign matter obstructs the airway. The standards state that attempts to remove water by means other than suction may be dangerous because they could cause aspiration of gastric contents, according to Dr Ornato.

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